

07/24/03

17364 U.S. PTO

Please type a plus sign (+) inside this box



PTO/SB/50 (06-03)

Approved for use through 01/31/2004. OMB 0651-0033

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

# **REISSUE PATENT APPLICATION TRANSMITTAL**

<b>Address to:</b> <b>Mail Stop Reissue</b> <b>Commissioner for Patents</b> <b>P.O. Box 1450</b> <b>Alexandria, VA 22313-1450</b>		<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="padding: 2px;"><b>Attorney Docket No.</b></td> <td style="padding: 2px;">117645-1032</td> </tr> <tr> <td style="padding: 2px;"><b>First Named Inventor</b></td> <td style="padding: 2px;">Thomas J. Laughlin</td> </tr> <tr> <td style="padding: 2px;"><b>Original Patent Number</b></td> <td style="padding: 2px;">6,298,862</td> </tr> <tr> <td style="padding: 2px;"><b>Original Patent Issue Date (Month/Day/Year)</b></td> <td style="padding: 2px;">10/9/01</td> </tr> <tr> <td style="padding: 2px;"><b>Express Mail Label No.</b></td> <td style="padding: 2px;">EV 227162532WS</td> </tr> </table>		<b>Attorney Docket No.</b>	117645-1032	<b>First Named Inventor</b>	Thomas J. Laughlin	<b>Original Patent Number</b>	6,298,862	<b>Original Patent Issue Date (Month/Day/Year)</b>	10/9/01	<b>Express Mail Label No.</b>	EV 227162532WS
<b>Attorney Docket No.</b>	117645-1032												
<b>First Named Inventor</b>	Thomas J. Laughlin												
<b>Original Patent Number</b>	6,298,862												
<b>Original Patent Issue Date (Month/Day/Year)</b>	10/9/01												
<b>Express Mail Label No.</b>	EV 227162532WS												
<b>APPLICATION FOR REISSUE OF:</b> (Check applicable)		<input checked="" type="checkbox"/> <b>Utility Patent</b> <input type="checkbox"/> <b>Design Patent</b> <input type="checkbox"/> <b>Plant Patent</b>											
<b>APPLICATION ELEMENTS (37 CFR 1.173)</b>		<b>ACCOMPANYING APPLICATION PARTS</b>											
<ol style="list-style-type: none"> <li>1. <input checked="" type="checkbox"/> <b>Fee Transmittal Form (PTO/SB/56)</b> (Submit an original, and a duplicate for fee processing)</li> <li>2. <input checked="" type="checkbox"/> <b>Applicant claims small entity status.</b> See 37 CFR 1.27.</li> <li>3. <input checked="" type="checkbox"/> <b>Specification and Claims in double column copy of patent format (amended, if appropriate)</b></li> <li>4. <input checked="" type="checkbox"/> <b>Drawing(s) (proposed amendments, if appropriate)</b></li> <li>5. <input checked="" type="checkbox"/> <b>Reissue Oath/Declaration (original or copy)</b> (37 C.F.R. 1.175) (PTO/SB/51 or 52)</li> <li>6. <input checked="" type="checkbox"/> <b>Power of Attorney</b></li> <li>7. <input checked="" type="checkbox"/> <b>Original U.S. Patent currently</b> <input checked="" type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> (If Yes, check applicable box(es))           <div style="margin-left: 20px;"> <input checked="" type="checkbox"/> <b>Written Consent of all Assignees (PTO/SB/53)</b>  <input checked="" type="checkbox"/> <b>37 C.F.R. § 3.73(b) Statement (PTO/SB/96)</b> </div> </li> <li>8. <input type="checkbox"/> <b>CD-ROM or CD-R in duplicate, Computer Program (Appendix) or large table</b></li> <li>9. <b>Nucleotide and/or Amino Acid Sequence Submission (if applicable, all of the following are necessary)</b> <ol style="list-style-type: none"> <li>a. <input type="checkbox"/> <b>Computer Readable Form (CFR)</b></li> <li>b. <b>Specification Sequence Listing on:</b> <ol style="list-style-type: none"> <li>i <input type="checkbox"/> <b>CD-ROM (2 copies) or CD-R (2 copies); or</b></li> <li>ii <input type="checkbox"/> <b>paper</b></li> </ol> </li> <li>c. <input type="checkbox"/> <b>Statements verifying identity of above copies</b></li> </ol> </li> </ol>		<ol style="list-style-type: none"> <li>10. <input checked="" type="checkbox"/> <b>Statement of status and support for all changes to the claims.</b> See 37 CFR 1.173 (c).</li> <li>11. <input checked="" type="checkbox"/> <b>Original Patent Grant</b> <div style="margin-left: 20px;"> <input checked="" type="checkbox"/> <b>Ribboned Original Patent Grant</b>  <input type="checkbox"/> <b>Statement of Loss (PTO/SB/55)</b> </div> </li> <li>12. <input type="checkbox"/> <b>Foreign Priority Claim (35 U.S.C. 119) (if applicable)</b></li> <li>13. <input type="checkbox"/> <b>Information Disclosure Statement (IDS)/PTO-1449</b> <input type="checkbox"/> <b>Copies of IDS Citations</b></li> <li>14. <input type="checkbox"/> <b>English Translation of Reissue Oath/Declaration (if applicable)</b></li> <li>15. <input checked="" type="checkbox"/> <b>Preliminary Amendment</b></li> <li>16. <input checked="" type="checkbox"/> <b>Return Receipt Postcard (MPEP 503) (Should be specifically itemized)</b></li> <li>17. <b>Other:</b> <u>Terminal Disclaimer</u></li> </ol>											
<b>18. CORRESPONDENCE ADDRESS</b>													
<input type="checkbox"/> <b>Customer Number:</b>		<b>OR</b> <input checked="" type="checkbox"/> <b>Correspondence address below</b>											
<b>Name</b>	Michael A. O'Neil, P.C.												
<b>Address</b>	5949 Sherry Lane, Suite 820												
<b>City</b>	Dallas	<b>State</b>	TX										
<b>Country</b>	USA	<b>Zip Code</b>	75225										
<b>Telephone</b>	214-739-8284												
<b>Fax</b>	214-739-0088												

NAME (Print/Type)

Michael A. O'Neil

Registration No. (Attorney/Agent)

23,007

Signature

Date

7/24/03

This collection of information is required by 37 CFR 1.173. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Reissue, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

 19972 U.S. PTO  
 10/66339

07/24/03

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

REISSUE APPLICATION FEE TRANSMITTAL FORM						Docket Number 117645-1032	
Claims as Filed - Part 1							
Claims in Patent		Number Filed in Reissue Application	(3) Number Extra	Small Entity		Other than a Small Entity	
(A)	(B)	(C)	(D)	Rate	Fee	Rate	Fee
20	20	0	0	x \$ 9 =	\$0	x \$ 18 =	\$0
1	1	0	0	x \$ 42 =	\$0	x \$ 84 =	\$0
Basic Fee (37 CFR					\$375	\$750	
Total Filing Fee					\$375	\$750	
Claims as Amended - Part 2							
(1) Claims Remaining After Amendment		(2) Highest Number Previously Paid For	(3) Extra Claims Present	Small Entity		Other than a Small Entity	
Total Claims (37 CFR 1.16(i))	Independent Claims (37 CFR 1.16(i))	MINUS	=	Rate	Fee	Rate	Fee
***	***	MINUS	**	x \$ 9 =	\$0	x \$ 18 =	\$0
***	***	MINUS	*****	x \$ 42 =	\$0	x \$ 84 =	\$0
Total Additional Fee					\$0	OR \$0	
<p>* If the entry in (D) is less than the entry in (C), Write "0" in column 3.</p> <p>** If the "Highest Number of Total Claims Previously Paid For" is less than 20, Write "20" in this space.</p> <p>*** After any cancellation of claims.</p> <p>**** If "A" is greater than 20, use (B - A); if "A" is 20 or less, use (B - 20).</p> <p>***** "Highest Number of Independent Claims Previously Paid For" or Number of Independent Claims in Patent (C).</p> <p><input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.</p> <p><input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ A duplicate copy of this sheet is</p> <p><input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees under 37 CFR 1.16 or 1.17 which may be required, or credit any overpayment to Deposit Account No. <u>50-0856</u> A duplicate copy of this sheet is enclosed.</p> <p><input checked="" type="checkbox"/> A check in the amount of \$ <u>375</u> to cover the filing / additional fee is enclosed.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p style="text-align: center;"><b>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</b></p> <div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div style="text-align: center;"> <p style="font-size: 1.5em;">7/24/03</p> <p>Date</p> </div> <div style="text-align: center;">   <p>Signature of Applicant, Attorney or Agent of Record</p> <p>Michael A. O'Neil</p> <p>Typed or printed name</p> </div> </div>							

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

### STATEMENT UNDER 37 CFR 3.73(b)

Applicant: Laughlin Products, Inc.

Application No.: 6,298,862 Filed: 10/9/01

Entitled: METHOD OF AND APPARATUS FOR AUTOMATICALLY COATING THE HUMAN BODY:

Laughlin Products, Inc.

(Name of Assignee)

, a corporation of the State of Texas

(Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)

states that it is:

1. ☒ the assignee of the entire right, title, and interest; or
2. ☐ an assignee of an undivided part interest

in the patent application identified above by virtue of either:

- A. ☒ An assignment from the inventor(s) of the patent application identified above. The assignment was recorded in the Patent and Trademark Office at Reel 011100, Frame 0530, or for which a copy thereof is attached.

OR

- B. ☐ A chain of title from the inventor(s), of the patent application identified above, to the current assignee as shown below:

1. From: \_\_\_\_\_ To: \_\_\_\_\_  
The document was recorded in the Patent and Trademark Office at  
Reel \_\_\_\_\_, Frame \_\_\_\_\_, or for which a copy thereof is attached.
2. From: \_\_\_\_\_ To: \_\_\_\_\_  
The document was recorded in the Patent and Trademark Office at  
Reel \_\_\_\_\_, Frame \_\_\_\_\_, or for which a copy thereof is attached.
3. From: \_\_\_\_\_ To: \_\_\_\_\_  
The document was recorded in the Patent and Trademark Office at  
Reel \_\_\_\_\_, Frame \_\_\_\_\_, or for which a copy thereof is attached.

☐ Additional documents in the chain of title are listed on a supplemental sheet.

☐ Copies of assignments or other documents in the chain of title are attached.

The undersigned (whose title is supplied below) is empowered to sign this statement on behalf of the assignee.

7-18-03

Date

Tom Laughlin

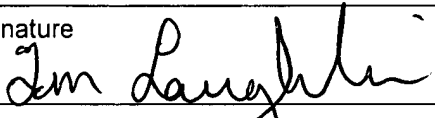
Signature

Thomas J. Laughlin

Typed or printed name

President

Title

<b>REISSUE APPLICATION: CONSENT OF ASSIGNEE; STATEMENT OF NON-ASSIGNMENT</b>		Docket Number (Optional) <b>117645-1032</b>
This is part of the application for a reissue patent based on the original patent identified below.		
Name of Patentee(s) <b>Thomas J. Laughlin</b>		
Patent Number <b>6,298,862</b>	Date Patent Issued <b>10/9/01</b>	
Title of	<b>METHOD OF AND APPARATUS FOR AUTOMATICALLY COATING THE HUMAN BODY: FOGGING TECHNOLOGY</b>	
<p>1. <input checked="" type="checkbox"/> Filed herein is a statement under 37 CFR 3.73(b). (Form PTO/SB/96)</p> <p>2. <input type="checkbox"/> Ownership of the patent is in the inventor(s), and no assignment of the patent is in effect.</p> <p>One of boxes 1 or 2 above must be checked. If multiple assignees, complete this form for each assignee. If box 2 is checked, skip the next entry and go directly to "Name of Assignee".</p> <p>The written consent of all assignees and inventors owning an undivided interest in the original patent is included in this application for reissue.</p>		
The assignee(s) owning an undivided interest in said original patent is/are _____, and the assignee(s) consents to the accompanying application for reissue.		
Name of assignee/inventor (if not assigned) <b>Laughlin Products, Inc.</b>		
Signature 	Date <b>7-18-03</b>	
Typed or printed name and title of person signing for assignee (if assigned) <b>Thomas J. Laughlin, President</b>		

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Patent No.: 6,298,862 B1

Issued: October 9, 2001

Patentee: Thomas J. Laughlin

Title: **METHOD OF AND APPARATUS FOR AUTOMATICALLY COATING THE HUMAN BODY: FOGGING TECHNOLOGY**

M/S REISSUE  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

CERTIFICATE OF MAILING BY EXPRESS MAIL	
"EXPRESS MAIL" Mailing Label No.	<u>EV227162532 US</u>
Date of Deposit:	<u>7-24</u> , 2003
I hereby certify that this paper or fee is being deposited with the U.S. Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated above and is addressed to the Assistant Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 (Mail Stop Reissue)	
Type or Print Name	<u>Valencia Carey</u>
Signature	<u>Valencia Carey</u>

**STATEMENT OF STATUS/SUPPORT FOR ALL CHANGES TO THE CLAIMS**

**PURSUANT TO 37 CFR 1.173(C).**

Dear Examiner:

Applicant respectfully requests that the Examiner review and approve pending Claims 1-20 submitted in the Preliminary Amendment filed concurrently herewith.

Applicant desires to correct an error in the patent which was made without any deceptive intention. As a result of the error, the patent is deemed wholly or partly inoperative by reason of the patentee claiming less than he had a right to claim in the patent. In particular, the patentee failed to claim all of the different devices that can be used for capturing fog generated by the fogging nozzle which is not received on the skin of the person situated within the coating chamber. Instead, the patentee only claimed at least one filter for capturing fog generated by the fogging nozzle which is not received on the skin of the person situated within the coating chamber. The Applicant desires to correct this error in the patent by amending Claim 1 to include the limitation of means for capturing

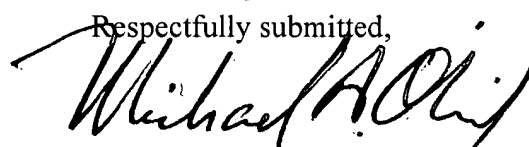
fog generated by the fogging nozzle which is not received on the skin of the person situated within the coating chamber. The different means and their equivalents considered within the scope of the amended Claim 1 include (for example): (1) filter 19 and fan 18 as shown in FIGURES 5 and 6 of the patent; (2) fan that can vent the spray residuals to the outside environment as described in col. 10, lines 63-64 of the patent; (3) filter 116 and fluid powered cylinder 118 as shown in FIGURE 13 and described in col. 17, lines 4-15 in the patent; (4) filter 146 and exhaust fan 148 as shown in FIGURE 14 and described in col. 17, lines 48-51 in the patent; (5) filter 142 and fan 140 as shown in FIGURE 15 of the patent; and (6) a disposal system including a drain can be used to remove the spray residuals from the coating chamber as described in column 12, lines 47-55.

In addition, Applicant has amended the limitation of "at least one fan for directing a flow of air...." in Claim 1 to recite "at least one fan for causing a flow of air....". This amendment was made to correct an antecedent error such that the claimed language "at least one fan for causing a flow of air...." now corresponds with the following language "....entrainment in the air flow caused by the fan...." later in the claim (see col. 18, line 43 in the patent).

Applicant respectfully requests consideration and allowance of pending Claims 1-20. Should it facilitate allowance of the reissue patent application, the Examiner is invited to telephone the undersigned attorney.

7-24-03

Respectfully submitted,



Michael A. O'Neil  
Registration No. 23,007

Michael A. O'Neil, P.C.  
5949 Sherry Lane, Suite 820  
Dallas, Texas 75225  
(214) 739-0088 telephone  
(214) 739-8284 facsimile